1	(only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label	/ No. EL190926		Ü	3	
ł	APPLICATION ELEMENTS	P	ADDRESS T		ssioner for Patents	╡	
	See MPEP Chapter 600 concerning utility patent app	lication		Box Patent Applic Washington, DC			
	4. Oath or Declaration a. Newly executed (original or cop b. Unexecuted original c. Copy from a prior application (3 (for continuation/divisional check i. Deletion of Inventor(s) Signed statement attached inventor(s) named in the prior see 37 CFR 1.63(d)(2) and 5. Incorporation by Reference (useable if Box 4c is checked)	cations ed R&D f filed) The Company of the application and is	7. Nucleot Submi a. Comput b. Paper c. Statem ACCOI 8. Assig document(s 9. 37 CI (when there 10. Engl 11. Infor (IDS)/I 12. Preli 13. Retu (Shout 14. Cert (if for	ofiche Computer Pro- ide and/or Amino Aci ssion (if applicable, a ster Readable Copy Copy (identical to comp- ent verifying identity of MPANYING APPLICA nment Papers (cover s is)) FR 3.73(b) Statement e is an assignee) Po- ish Translation Docume mation Disclosure State PTO-1449 Copies of minary Amendment rn Receipt Postcard (N old be specifically itemiz fied Copy of Priority Do- eign priority is claimed) er: Express Mail Certific EL190926813US	d Sequence all necessary) outer copy) above copies ATION PARTS heet & ower of Attorney ent (if applicable) ement f IDS Citations IPEP 503) red) ocument(s)		
	 16. ☐ If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: Amend the specification by inserting before the first line: This is a ☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No.: 08/062,023, filed May 14, 1993 For this divisional application, please cancel original Claims 15-27 & 33, and add new claims 34, 35 & 36 before calculating the filing fee. 						
	18. ☐ Customer Number or Bar Code Label	CORRESPONDE	ENCE ADDRES	SS r ⊠ Correspondence <i>P</i>	Address below		
	Name: Philip S. Johnson, Esq.						
	Address: Johnson & Johnson						
		One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 USA					
	New Brunswick, NJ 08						
		19. TELEPHONE CONTACT					
		ease direct all telephone calls or telefaxes to Catherine Kurtz Gowen at: elephone: (732) 524-2681 Fax: (732) 524-2808					
	10 SIGNATURE OF AR	Telephone: (732) 524-2681 Fax: (732) 524-2808 19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
	NAME Catherine Kurtz G		<u> </u>	Reg. No. 32	2,148		
	IVAIVIE Catherine Ruitz C	~ K/	7	\			
	SIGNATURE CATALY	we TX	owen	J			
	DATE September 29, 20						

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Thomas J. Cumins et al.

For : DIAGNOSTIC COMPOSITIONS, ELEMENTS, METHODS AND TEST

KITS FOR AMPLIFICATION AND DETECTION OF TWO OR MORE DNA'S USING PRIMERS HAVING MATCHED MELTING

TEMPERATURES

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Date of Deposit: September 29, 2000

I hereby certify that this complete divisional application, including combined declaration and power of attorney, specification pages, claims, and informal drawings, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Alwin Haywood

(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)

Application Number FIIng Date First Named Inventor Group Art Unit Examiner Name Attorney Docket Number Completed Known September 29, 2000 Group Art Unit Examiner Name Attorney Docket Number CDS-226

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)		(3)	(4)	(5)
FOR:	NUMBER	FILED	NUMBER EXTRA	RATE	BASIC FEE \$760.00
TOTAL CLAIMS	22 - 20 =		2	x 18.00	\$ 36.00
INDEPENDENT CLAIMS	7 - 3 =		4	x 78.00	\$ 312.00
MULTIPLE DEPENDENT CLAIMS			N/A	\$260.00	\$260.00
				TOTAL FEES	\$1,368.00

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/CDS-226/CG in the amount of \$1,368.00. Three copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/CDS-226/CG. Three copies of this sheet are enclosed.

SUBMITTED E	IY:	Complete (if applicable)
Typed or Printed Name	Catherine Kurtz Gowen	Reg. No. 32,148
Signature	Catherine Gower Date: S	eptember 29, No. 10-0750